# **Texas Health Trace Updates**

for Local and Regional Users

This biweekly communication is intended to provide local and regional users of Texas Health Trace with useful information about recent and upcoming system enhancements and features. Next report expected September  $8^{th}$ 

#### Tuesday, August 18, 2020

### **Major Highlights**

### Queues

- No contact queues
  - No patient information: Automatically pulls case investigations without patient information into a bulk of provider queue for follow-up by Call Center
  - No patient information and no valid provider information: Automatically pulls case investigations without patient or valid provider information into queue for DSHS monitoring and follow-up
- New escalation gueues
  - Epi-Lead Exposed Contact: places identified exposed contact investigations into a work queue for Epi-Lead follow-up
  - General Exposed Contact: places identified exposed contact investigations into jurisdictional work queues for follow-up
- Support Services Queues
  - Added "unable to contact" as an outcome
  - Added phone number to support services queues
  - Updated exposed contact queues
- Self-service portal
- Updated the exposed contact location type
- Updated the exposed contact location type into Spanish

#### Agency Data Import

- Established THT field mapping for person, case, lab test, and exposed contacts
- Set up configuration of person, case, lab test, and exposed contacts to ingest files into THT
- Ran one-time production import and loaded over 49k records into THT
- Continued mapping and testing any new received files for import from 1A jurisdictions
- Have begun migration of jurisdictional historical data into THT

### Jurisdiction User Group

 Created Advisory Board of Regional and Local leads in order to implement priority work in the field, understand how THT can support them in their roles as public health officials and better inform their decisions in efforts associated with COVID-19.

## Accomplishments

#### Jurisdiction line list upload:

Finalized approach for line list upload from jurisdictional users directly into THT to include:

#### Movement restriction

- Generated informational communications to self-isolate and quarantine for exposed contacts and cases within specific criteria from THT
- Functionality available, awaiting DSHS email, address, and approval for security.



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#### Potential outbreak management

- Started development of outbreak object to link associated cases and locations.
- Location Network Mapping (Social Network Mapping)
- Finalized approach to identify location addresses for more accurate data collection and network mapping

#### Monitoring improvement through dashboard updates

- Call center performance dashboard
- Executive dashboard

### THT and NEDSS Data Exchange

Mapped THT export for NEDSS import via data hub for CDC Case reporting

#### Ongoing script updates

No script updates required this sprint.

#### **Latest Resources and Trainings**

- Preview for all users: 8/14/2020 THT system changes
- Job Aid: 8/14/2020 THT system changes for regional/local staff
- Job Aid: 8/14/2020 THT system changes for regional/local epi leads
- Soft Skills Video: Customer Service for Seniors
- Soft Skills Video: Strategies to Reduce Unconscious Bias (Part 2)
- Live Trainings: Standing weekly overview trainings for regional/local partners on Wednesdays, Thursdays, and Fridays

Note: User Guides are under development for new regional/local roles in THT (data enterer, case investigator, epi lead). Job aids will also be converted to regional/local-specific roles.

#### **Lessons Learned**

- If you see the case banner (or status) set to Quarantined, the call center has established contact with the case and the case may or may not be in isolation. It's up to the Region/LHE to determine if the case meets closure criteria. This flag also allows the Region/LHE to take cases back should they want to do case monitoring.
- To make a bigger public health impact in COVID-19 response,
  - Cases with a specimen date of older than 21 days were designated as a lower priority investigation and,
  - A special team of contact tracers were created to contact providers of cases with no contact information to gather the necessary contact information.
- Ensuring accuracy in data mapping is time intensive
- Communicate early, frequently, and often when issues or major system changes occur



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#### **Open Issues**

- All manually entered lab tests with cases were accidentally auto-shunted the week of August 3<sup>rd</sup>. While fixing this issue, now all manually entered lab tests, even if requested to reassign the CI to the call center, are not shunting. A staff member is doing periodic bulking shunting manually until this is fixed.
- Need to translate scripts to Spanish for easier use
- Need to update Case definitions to match latest CDC guidelines. These changes will impact:
  - Self-service portal
  - Scripts
  - Case classification variables
  - Exposed contacts promoting to a case

#### **Expectations by August 22<sup>nd</sup>**

- Planning and prioritization of enhancements and major functionality for next 6 weeks (3 sprints) to consider items such as:
  - o Continued development of outbreak management
  - Continued development to social network mapping
  - o Data QA management
  - Line list ingestion
  - Completion of THT and NEDSS data exchange
  - SMS Case symptoms monitoring

#### Plans for Next Sprint Cycle (Release: September 4th)

TBD: Based on planning outcomes mentioned above.